Folk Arts Project Program

FY 05 Final Report

Deadline: 30 days after the completion of the grant period

1.	Grant Number:			F	iscal Year:	2005			
2.	Grantee's Name								
3.	Mailing Address								
4.	City		5.	Sta	ate	6. Zip+4			
7.	County		8.	FE	EIN#	_			
9.	Phone Number		10	. Fa	x Number				
11.	Email Address								
12.	Contact Person fo	r this report							
13.	Phone Number	•	14	. Fa	x Number				
15.	Email Address								
16.	Activity Dates	Begin:			End:				
17.	Z. Number of individuals who benefited from this grant Youth Adult					Adult			
18.	B. Dollar amount spent on arts education \$								
19.	19. Number of artists who participated in this activity								
20.	20. What counties were served?								
21.	21. KAC dollars awarded for this activity leveraged \$ dollars from other sources								
22.	22. List other sources:								

As you reach the conclusion of your Folk Arts Project Grant funding period for FY 2005, please respond to the following series of self-assessment questions, on a maximum of two pages, placing your organization's name in the top right hand corner of the page.

1. Impact/Evidence

Describe the impact this project had on the community and provide supporting evidence (Note: Evidence may include materials created, survey results, participant comments, observation, bibliographies, publications, quantitative participation data, etc.)

Grantee	
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Actual

(grant amount)

- How did the activity help educate the community about the cultural traditions being presented?
- How was the represented folk group involved in the planning and interpretation of their cultural tradition?
- How did the cultural experts who were involved with this activity enhance the project?
- What new groups or audiences were reached through this activity?

2. Credit:

Income

KY Folk Music Grant

Net / (Deficit)

How did you satisfy the Kentucky Arts Council credit requirement? If applicable, attach copies of programs, advertisements, newsletters, web site links, etc. containing the KAC credit line.

Grant Activity Financial Report

Matching Funds (list each major source)

Kentucky Arts Council Folk Arts Project and Tour of

Please attach a complete report of the activity income and expenses (one-page maximum), using the following format. Do not include in-kind contributions and expenses, although you may describe these in a budget note. If the actual figures differ substantially from the original budget, please explain in budget notes.

Original Budget

Total Income		
	1	
Expenses	Original Budget	Actual
List each line item from the budget in your applica	ation.	

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	Grantee
	Folk Arts Project Final Report
Mailing Address for Final Report	
Kentucky Arts Council Old Capitol Annex 300 West Broadway Frankfort, KY 40601-1980 502-564-3757 Toll Free: 888-833-2787	
, ,	eport on behalf of the grantee and that the foregoing to the best of my knowledge. All signatures must
Preparer's Signature	Date
All signatures must be	in RED ink.

Title

Type Name

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